S&H Form: PTO/SB/30 (10/08)

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

(INCLUDING FILING FEE AND/OR PETITION FOR EXTENSION OF TIME FEE)

Subsection (b) of 35 U.S.C. §132, effective May 29, 2000 provides for continued examination of a utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA)

To: Commissioner for Patents Box RCE PO Box 1450 Alexandria, VA 22313-1450		Attorney Docket	Attorney Docket No.:1614.1359						
First Named	Yasuo TAMURA, et al.								
Inventor									
Application No.	10/647,334	Group Art Unit	3715						
Filing Date	August 26, 2003	Examiner	Timothy A. Musselman						
CPA Filing Date		Confirmation No	3539						
Title of Invention	TRANSMITTING METHOD, TRANSMITTING APPARATUS, AND TRANSMITTING PROGRAM OF PASS/FAIL INFORMATION OF EXAMS								
This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.									
1. Submission required under 37 C.F.R. §1.114 (Box a or b must be completed) a.									
Miscellaneous									
a. Suspension of action on the above-identified application is requested under 37 C.F.R. §103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required). b. Other									
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				BASIC FEE			\$ 810.00	
hereby made f which the requ	al Action set an <u>our an extension out</u> isite fee is enclose 0)); (4 months (\$	of time t sed (1 i	to cover the month (\$130	date thi 0)); (2 m	s RCE is fi onths (\$49	led, for		
Claims As Amended	Claims Remaining After Amendment	ns Remaining Highest Nu		Number Extra		ate		
Total Claims	3	20	- 20 =	0	X \$ 52.0	0 =	\$ 0.00	
Independent Claims	1	6	- 3 =	0	X \$ 220.	00 =	\$ 0.00	
Suspension Fe	ee (\$130.00)							
Total of above Calculations =							\$ 810.00	
Reduction by 50% for								
TOTAL FEES DUE =							\$ 810.00	
b. A Verified Statement Claiming Small Entity Status was previously filed and such status is still proper and desired. c. is no longer claimed. 5. Other: 6. METHOD OF PAYMENT A check in the amount of \$_ is enclosed. Charge "TOTAL FEES DUE" to Deposit Account No. 19-3935. (A duplicate copy of this form is enclosed.) 7. GENERAL AUTHORIZATION The Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 C.F.R. 1.16 (filing fees) or 37 C.F.R. 1.17 (processing fees) during the prosecution of this application and of any related application(s) claiming benefit hereof pursuant to 35 U.S.C. §120 to maintain pendency hereof and of any such related application to:								
Deposit Account No. 19-3935. 8. CORRESPONDENCE ADDRESS								
STAAS & HALSEY LLP 21171 PATENT TRADEMARK OFFICE								
9. SIGNATURE OF ATTORNEY OR AGENT REQUIRED								
NAME	John R. Bed				REGISTRATION NO. 62,168			
SIGNATURE	John R.	Bs	edez		DATE	May 4, 20	009	